KENTUCKY TITLE XXI STATE PLAN FACT SHEET

Name of Plan: Kentucky CHIP (K-CHIP)

Date Plan Submitted: Date Plan Approved:June 12, 1998
November 25, 1998

Effective Date: July 1, 1998 for Medicaid expansion

Effective Date: November 19, 1999 for separate SCHIP

Date First Amendment Submitted: June 4, 1999

Date First Amendment Approved: September 3, 1999

Amendment Effective Date: July 1, 1999

Date Second Amendment Submitted: June 19, 2000 **Date Second Amendment Approved:** July 2, 2001

Amendment Effective Date: November 1, 1999

Date Third Amendment Submitted: August 28, 2001 **Date Third Amendment Approved:** November 26, 2001

Amendment Effective Date: June 1, 2001

Date Fourth Amendment Submitted: June 27, 2002

Date Fourth Amendment Approved: September 23, 2002

Amendment Effective Date: July 1, 2002

Date Fifth Amendment Submitted:September 24, 2002Date Fifth Amendment Approved:December 17, 2002Amendment Effective Date:August 1, 2002

Background

- Kentucky implemented a combination State Children's Health Insurance Program (SCHIP).
- Its Medicaid expansion originally provided coverage for children ages 14 through 19 in families up to 100 percent of the Federal Poverty Level (FPL). An additional Medicaid expansion occurred to cover children ages 1 to 19 in families up to 150 percent FPL.
- Children 0 through 19 years of age in families up to 200 percent of the FPL who are not otherwise eligible for Medicaid are enrolled in a separate child health program (KCHIP).

Amendments

- Kentucky implemented its first amendment on July 1, 1999, expanding eligibility for its Medicaid SCHIP expansion to 150 percent of the FPL for children from birth to age 19.
- On June 19, 2000, Kentucky submitted its second amendment to change the service delivery mechanism by substituting the existing Medicaid infrastructure and to create a separate child health program for children with family income between 150 percent and 200 percent of the FPL.
- Eligibility and health care services are provided through the existing Medicaid service delivery system. The KCHIP benefit package is essentially the same as the State's title XIX Medicaid state plan with the exception of non-emergency transportation and EPSDT special services. Cost sharing was deleted.
- On August 28, 2001, Kentucky submitted an amendment to its title XXI plan to change the enrollment and re-certification process both in the Medicaid expansion plan and its separate child health program.
- Beginning June 1, 2001, the Department for Medicaid Services (DMS) resumed the
 process of requiring that written verification of income and proof of child-care
 expenses be included with the KCHIP/Medicaid initial mail-in application. In
 addition, DMS resumed face-to-face interviews and verification of income and
 expenses for recipients at the time of their KCHIP re-certification. The State plan
 amendment also updates and reflects the State's Medicaid service delivery model.
- On June 27, 2002, Kentucky submitted an amendment to its State plan that updates and amends the SCHIP state plan to indicate the State's compliance with the final SCHIP regulations and to change the initial application and renewal processes.
- On September 24, 2002, Kentucky submitted an amendment to its state plan to charge 18-year olds a \$1 co-pay for pharmacy prescriptions. This SCHIP amendment will create the same cost-sharing requirement that is currently being imposed through the State's title XIX State plan amendment.

Children Covered Under Program

• As of September 30, 2001, the State reports that a total of 21,025 children were enrolled in the separate child health program and that a total of 45,771 children were enrolled in the Medicaid expansion program.

Administration

• The Kentucky Department for Medicaid Services has the operational responsibilities for both the Medicaid expansion and KCHIP.

Health Care Delivery System

• The service delivery system is the same for the KCHIP Medicaid expansion and separate child health program as it is for all Medicaid beneficiaries. Medicaid and KCHIP beneficiaries are served through the Kentucky Patient Access and Care (KenPac) Program, authorized through a section 1915(b) Medicaid waiver, in all of the State except the Louisville Region where beneficiaries are served by a Health Care Partnership, a managed care organization authorized through a section 1115 Medicaid waiver.

Benefit Package

The benefit plan is comprehensive and emphasizes preventive care. KCHIP is a
benchmark plus package that is based on the State Employees Health Benefits Plan
with additional services that bring the service package almost to the level of the
Medicaid except EPSDT special services and non-emergency transportation are not
covered.

Cost Sharing

• There is no cost sharing for targeted low-income children under the age of 18. Beneficiaries who are 18 must pay a \$1 co-pay for pharmacy prescriptions.

State Action to Avoid Crowd Out

- A child in the separate child health program who has had health insurance within the past 6 months is not considered a targeted low-income child except in cases of extenuating circumstances as defined by the State.
- These extenuating circumstances can include, but are not limited to, the loss of employment due to factors other than voluntary termination; death of a parent; divorce; where the child's coverage had been provided by a non-parental adult; and change of employment that does not offer the option for dependent coverage.
- There is no 6-month waiting period for children in the KCHIP Medicaid expansion program.

Coordination Between SCHIP and Medicaid

• The local DCBS offices provide eligibility determination for Medicaid services, and KCHIP's enrollment process is blended with Medicaid. This provides for a simplified, seamless approach that provides the families with an enhanced and flexible enrollment process, promotes access, and reduces duplication of tasks for staff.

Outreach Activities

• The State has conducted media campaigns and outreach activities at schools, clinics, community centers, health fairs, health departments, and housing projects. Other coordination efforts include working with agencies that have contact with eligible populations, such as the Salvation Army, Head Start, food banks and local churches.

Financial Information

Total FY 2002 SCHIP Allotment -- \$37,984,461 FFY '02 Enhanced Federal Matching Rate -- 78.92 percent

FFY 2003

Federal Share: \$85,536,495 State Share: \$22,847,305 Total: \$108,383,800

Updated by: CMS, CMSO, FCHPG, DSCHI, December 17, 2002